

PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)		Docket Number (Optional) 740819-1053	
<p style="margin: 0;">CERTIFICATE OF MAILING OR TRANSMISSION [37 CFR 1.8(a)]</p> <p>I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to Mail Stop _____, Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450, or being facsimile transmitted to the USPTO at 571 273 8300</p> <p>Signature: _____</p> <p>Name: _____</p>	<p style="margin: 0;">In re Application of Yutaka TANAKA et al.</p>		
	<p style="margin: 0;">Application Number 10/807,136</p>	<p style="margin: 0;">Filed 03/24/2004</p>	
<p style="margin: 0;">For FRAME AND METHOD FOR FABRICATING THE SAME</p>			
<p style="margin: 0;">Group Art Unit 1725</p>	<p style="margin: 0;">Examiner Michael Aboagye</p>		
	<p style="margin: 0;"> </p>		
<p>This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.</p>			
<p>The requested extension and appropriate entity fee are as follows (check time period desired):</p>			
<p><input type="checkbox"/> One month (37 CFR 1.17(a)(1)) - (\$60/\$120) \$ _____</p>			
<p><input type="checkbox"/> Two months (37 CFR 1.17(a)(2)) - (\$225/\$450) \$ _____</p>			
<p><input checked="" type="checkbox"/> Three months (37 CFR 1.17(a)(3)) - (\$520/\$1050) \$ <u>1050.00</u></p>			
<p><input type="checkbox"/> Four months (37 CFR 1.17(a)(4)) - (\$795/\$1590) \$ _____</p>			
<p><input type="checkbox"/> Five months (37 CFR 1.17(a)(5)) - (\$1080/\$2160) \$ _____</p>			
<p><input type="checkbox"/> Applicant claims small entity status.</p>			
<p><input type="checkbox"/> A check to cover the fee is enclosed.</p>			
<p><input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.</p>			
<p><input type="checkbox"/> The Commissioner has already been authorized to charge fees in this application to a Deposit Account.</p>			
<p><input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number <u>19-2380</u>. I have enclosed a duplicate copy of this sheet.</p>			
<p>WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.</p>			
<p>I am the <input type="checkbox"/> applicant/inventor</p>			
<p><input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).</p>			
<p><input type="checkbox"/> attorney or agent of record.</p>			
<p><input checked="" type="checkbox"/> attorney or agent under 37 CFR 1.34(a). Registration number if acting under 37 CFR 1.34(a) 50,219.</p>			
<p><u>/Marc W. Butler, Reg. # 50,219/</u></p>		<p><u>March 6, 2008</u></p>	
<p>Signature</p>		<p>Date</p>	
<p><u>Marc W. Butler</u></p>		<p><u>202 585 8000</u></p>	
<p>Typed or printed name</p>		<p>Telephone Number</p>	
<p>NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.</p>			
<p><input type="checkbox"/> Total of _____ forms are submitted.</p>			

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